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Inder the Paperwork Reduction Act of 199	5, no person are required to	respond to a collection of inforr	nation unless it displays a valid OMB control number			
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2008  Applicant claims small entity status. See 37 CFR 1.27		Complete if Known				
		Application Number	10/520,462-Conf. #4516 August 12, 2005 Henrik Holter			
		Filing Date				
		First Named Inventor				
		Examiner Name	M. C. Wimer			
		Art Unit	2821			
OTAL AMOUNT OF PAYMENT	(\$) 1,740.00	Attorney Docket No.	43327-212567			
METHOD OF DAYMENT (shook all	Ab at a sub o					

METHOD OF	PAYMENT (check	all that apply)							
Check	Credit Card	Money Order	None	Other (	please identify	<b>)</b> :			
x Deposit Ac	count Deposit Account	Number: 22	-0261	Deposit /	Account Name:	Ve	Venable LLP		
For the	above-identified dep	osit account, the [	Director is he	reby authorize	d to: (check	all that apply)			
x cı	harge fee(s) indicate	d below		Charge	e fee(s) indi	cated below, e	xcept for the	e filing fee	
	harge any additional e(s) under 37 CFR 1		yments of	x Credit	any overpa	yments			
FEE CALCU	<del>```</del>								
1. BASIC FILIN	G, SEARCH, AND E	XAMINATION FE	ES			- · · ·		<b>*****</b>	
	F	ILING FEES	SEAR	CH FEES	EXAMIN	ATION FEES	,		
Application Ty	ype Fee (S	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)	
Utility	310		510	255	210	105			
Design	210		100	50	130	65			
Plant	210		310	155	160	80			
Reissue	310		510	255	620	310			
Provisional	210		0	0	0	0			
2. EXCESS CLA			ŭ	·	ŭ	v	9	mall Entity	
Fee Description							Fee (\$)	Fee (\$)	
	r 20 (including Reis	sues)					50	25	
Each independe	ent claim over 3 (incl	luding Reissues)					210	105	
Multiple depend	dent claims						370	185	
Total Claims	Extra Claims	Fee (\$)	Fee Pai	d (\$) Multiple Dep			ent Claims		
		x =			Fee	(\$)	Fee Paid (\$)	!	
•	ber of total claims paid fo							_	
Indep. Claims									
	- 3 = ber of independent claim:	s paid for, if greater th	an 3.						
3. APPLICATIO		,							
	ation and drawings e	xceed 100 sheets	of paper (ex	cluding electro	onically file	d sequence or	computer		
	der 37 CFR 1.52(e)), action thereof. See				or small ent	ity) for each a	dditional 50		
Total Sheet	<u>Extra Shee</u>			itional 50 or frac		Fee (\$)	<u>Fee P</u>	aid (\$)	
4. OTHER FEE			(,			•	Fees F	Paid (\$)	
Non-English	Specification, \$13	0 fee (no small e	ntity discour	nt)					
Other (e.g., late filling surcharge): 1253 Extension for response within third month previously 930.00									
paid \$120 with response filed on January 24, 2008) 1801 Request for continued examination (RCE) (see 37 810.00									
		Tou T Reques	t for contin	ueo examina	uon (RCE)	(see 3/	810	J.UU	
SUBMITTED BY	1 7		クー			T			
Signature	GNA	mill	/ Re	egistration No. ttomey/Agent)	37,134	Telephone	(202) 344	-4936	
Name (Print/Type)	Eric J. Franklin					Date	March 24,	, 2008	